

Draft Key Questions

Question 1

For adults (aged 18 to 64) with schizophrenia or related psychoses, or bipolar disorder, what is the comparative effectiveness of typical vs. atypical antipsychotics for improving functional capacity and decreasing health care system utilization?

Functional capacity to include any of the following: employment/personal earnings, social relatedness/functioning, encounters with legal system, sexual function/dysfunction

Health care system utilization to include: time to hospitalization/re-hospitalization (due to mental illness and all-cause) and rates of hospitalization/re-hospitalization, rates emergency department visits, mean hospital bed days, LOS (hospitalization)

Question 2

For adults (aged 18 to 64) with schizophrenia or related psychoses, or bipolar disorder, do typical vs. atypical antipsychotics differ for improving core illness symptoms?

Core illness symptoms for schizophrenia or related psychoses to include: positive (i.e., delusions, hallucinatory behavior) and negative (i.e., passive/apathetic social withdrawal, blunted affect) symptoms, and general psychopathology (i.e., preoccupation, lack of insight, motor retardation)

Core illness symptoms for bipolar disorder to include: mood, motor activity/energy, sleep, speech, behavior

Question 3

Do typical and atypical antipsychotics differ in medication-associated adverse events and safety when used in adults (aged 18 to 64) with schizophrenia or related psychoses, or bipolar disorder? This includes:

- i. Overall adverse events
- ii. Specific adverse events
- iii. Withdrawals/Time to withdrawal due to adverse events
- iv. Persistence and reversibility of adverse events

Question 4

Do typical and atypical antipsychotics differ in other outcomes when used in adults (aged 18 to 64) with schizophrenia or related psychoses, or bipolar disorder? Outcomes include:

- i. Medication adherence and persistence (and associated dosing, time to discontinuation of treatment)
- ii. Patient insight into illness
- iii. Suicide-related behaviors, death by suicide
- iv. Health-related QOL
- v. Patient satisfaction

Question 5

Does the effectiveness and risks of atypical vs. typical antipsychotics vary in differing sub-populations including but not limited to:

- i. Disorder subtypes
- ii. Gender
- iii. Age group (18–35yrs, 36–54yrs, 55–64yrs)
- iv. Race
- v. Co-morbidities
- vi. Drug